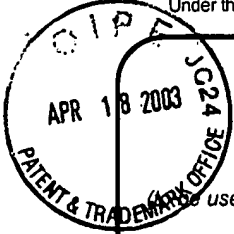


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# TRANSMITTAL FORM

(This form is used for all correspondence after initial filing)

|  |   |                        |                  |
|--|---|------------------------|------------------|
| <b>TRANSMITTAL FORM</b><br>(This form is used for all correspondence after initial filing) |   | Application Number     | 09/990,702       |
|  |   | Filing Date            | November 9, 2001 |
|  |   | First Named Inventor   | Keith W. Diveley |
|  |   | Art Unit               | 2161             |
|  |   | Examiner Name          | Unassigned       |
| Total Number of Pages in This Submission   | 1 | Attorney Docket Number | 20375-004010     |

## ENCLOSURES (Check all that apply)

|   |  |   |
|---|--|---|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment / Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input checked="" type="checkbox"/> Supplemental Information Disclosure Statement, PTO Form SB/08A and 5 references<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts/Incomplete Application<br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) | <input type="checkbox"/> After Allowance Communication to Group<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br>1. Return Postcard<br>2. PCT International Search Report |
| Remarks: The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.<br><br>No fee transmittal is attached as this IDS is being filed prior to receipt of the first Office Action from the PTO.  |  |   |

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|                    |   |                 |
|--------------------|---|-----------------|
| Firm or Individual | Townsend and Townsend and Crew LLP<br>Douglas M. Hamilton | Reg. No. 47,629 |
| Signature          |   |                 |
| Date               | April 14 2003   |                 |

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## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: April 14, 2003

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| Typed or printed | Sara B. McPeak |      |                |
| Signature        |                | Date | April 14, 2003 |